DE 16 2004

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM			Application Number		10/734,902				
			Filing Date_		12/12/2003				
			First Named Inventor		Joshua D. Rabinowitz				
(to be used for all cor	respondence after i	nitial filing)	Art Unit		1616				
			Examiner Name						
Total Number of Pages in This Submission 4			Attorney Docket Nur	mber	00026.04CON				
		ENCLOS	JRES (check all tha	at apply)					
Fee Transmittal Form		Drawing(s	s) -related Papers]]	After Allowance communication to Group Appeal Communication to Board of Appeals and Interferences				
Amendment / Reply		Petition		[Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)				
After Final			o Convert a al Application	[Proprietary Information				
Affidavits/de	eclaration(s)		Attorney, Revocation of Correspondence	[Status Letter				
Extension of Time Request Ter			Disclaimer		Other Enclosure(s) (please identify below):				
Express Abandonment Request Req			for Refund		Request for Withdrawal as Attorney or Agent (in triplicate) pages				
Information Disclosure Statement CD, Nur			nber of CD(s)	.	2. Return Receipt Postcard				
Certified Copy of Pri	iority	Remarks			1				
Response to Missing Incomplete Applicat	•		1						
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under 37 CF	FR 1.52 or 1.53								
	SIGNATURE	E OF APPLICA	NT, ATTORNEY, OR	AGENT					
Firm Elain or Individual name	ie C. Stracker - 43	3,166							
Signature	Mari	Asto	role	_					
Date [1								
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CERTIFICATE OF TRANSMISSION/MAILING hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the									
Typed or printed name	er S								
Signature		icali.	Date	DEC 1.3.2004					

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

REQUEST FOR WITHDRAWAL **AS ATTORNEY OR AGENT**

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	Application Number	10/734,902
	Filing Date	12/12/2003
REQUEST FOR WITHDRAWAL	First Named Inventor	Joshua D. Rabinowitz
AS ATTORNEY OR AGENT	Art Unit	1616
	Examiner Name	
	Attorney Docket Number	00026.04CON

To: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450									
I hereby apply to withdraw as attorney or agent for the above identified patent application.									
The reasons for t	his requ	est are:							
This request is being made for the reason that the Assignee no longer retains the attorney of record as an employee. The Assignee is currently handling their own patent prosecution.									
		COR	RESPONDENCE A	DDRE	SS				
1. The corre	sponden	ce address is	NOT affected by the	nis with	drawal.				
2. X Change th	e corres	pondence ad	dress and direct all	future	corresp	ondence	to:		
Customer Nur	Customer Number								
Firm or Individual Name IP Department (Alexza MDC)									
Address	Address 1001 East Meadow Circle								
Address									
City		Palo Alto			State	CA		ZIP	94303
Country									
Telephone				l	Fax				
This request is made on behalf of myself and all the attorneys/agents of record, the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number									
This request is enclosed in triplicate (including any attachments).									
Name	Elaine C	Stracker	C_{λ}						
Signature	Hickory	Registration No. 43,166							
Date	DFC_	1 3 2004							
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.									

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/83 (06-03)

Approved for use through 11/30/2005. OMB 0651-0059

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/734,902
Filing Date	12/12/2003
First Named Inventor	Joshua D. Rabinowitz
Art Unit	1616
Examiner Name	
Attorney Docket Number	00026.04CON

To: Commissione P.O. Box 1450 Alexandria, V)							
I hereby apply to withdraw as attorney or agent for the above identified patent application.								
The reasons for this	The reasons for this request are:							
		he reason that the Assignee n heir own patent prosecution.		the attori	ney of reco	rd as an emple	oyee. The	
		CORRESPONDI	ENCE ADDRE	SS				
1. The correspo	onden	ce address is NOT affect	ed by this with	ndrawal.	<u>. </u>			
2. X Change the	corres	pondence address and d	lirect all future	correspo	ondence	to:		
Customer Number	Customer Number							
Firm or Individual Name		IP Department (Alexza MD	OC)					
Address		1001 East Meadow Circle						
Address								
City		Palo Alto		State	CA	ZIP	94303	
Country								
Telephone				Fax				
all the attorne the attorneys/	ys/age /agents	behalf of myself and nts of record, (with registration numbers) associated with Customer		ttached pa	aper(s), o	,		
		olicate (including any attacl						
		. Stracker						
Signature War Chical				Registra	tion No.	43,166		
		3 2604						
NOTE: Withdrawal is ef approval of withdrawal a withdraw is normally dis	and the	when approved rather than e expiration date of a time p yed	when received eriod for respor	l. Unless ase or pos	there are sible exte	at least 30 da nsion period,	ys between the request to	

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestion reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/83 (06-03)

Approved for use through 11/30/2005. OMB 0651-0035

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/734,902
Filing Date	12/12/2003
First Named Inventor	Joshua D. Rabinowitz
Art Unit	1616
Examiner Name	
Attorney Docket Number	00026.04CON

To: Commissio P.O. Box 14 Alexandria,	50		.					
I hereby apply to withdraw as attorney or agent for the above identified patent application.								
The reasons for this request are:								
•		the reason that the Assignee no longer their own patent prosecution.	retains	the attori	ney of reco	ord as a	n emplo	yee. The
	,	CORRESPONDENCE	ADDRE	ss				
1. The corre	sponden	ce address is NOT affected by the	his with	drawal.				
2. A Change th	ne corres	pondence address and direct all	future	correspo	ondence	to:		
Customer Nur	Customer Number							
OR								
Firm or Individual Name IP Department (Alexza MDC)								
Address		1001 East Meadow Circle						
Address					-			
City		Palo Alto		State	CA		ZIP	94303
Country								
Telephone				Fax				
This request is made on behalf of myself and all the attorneys/agents of record, the attorneys/agents (with registration numbers) listed on the attached paper(s), or the attorneys/agents associated with Customer Number								
This request is enclosed in triplicate (including any attachments).								
Name	Elaine (Stracker 6						
Signature	Re	in Colicate		Registra	tion No.	43,16	6	
Date	DEC. 1							
NOTE: Withdrawal is approval of withdraw withdraw is normally	al and the	when approved rather than when r e expiration date of a time period for ved.	eceived r respon	. Unless ise or pos	there are ssible exte	at leas ension	st 30 da period,	ys between the request to

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you are required to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.